

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002973

Entity Name: MEADOWS OF CITRUS COUNTY HOMEOWNERS' ASSOCIATION, INC.**FILED**
Mar 11, 2019
Secretary of State
1034708006CC**Current Principal Place of Business:**6695 WEST ROBIN LANE
HOMOSASSA, FL 34448**Current Mailing Address:**PO BOX 1003
HOMOSASSA SPRINGS, FL 34447 US**FEI Number: 59-3551802****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**GADKE, LINDA
6695 WEST ROBIN LANE
HOMOSASSA, FL 34448 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:** LINDA GADKE

03/11/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR

Name GADKE, LINDA

Address 6695 WEST ROBIN LANE

City-State-Zip: HOMOSASSA FL 34448

Title VP, DIRECTOR

Name TRASK, PHIL

Address 6531 W ROBIN LANE

City-State-Zip: HOMOSASSA FL 34448

Title SECRETARY, DIRECTOR

Name GIBSON, JANET

Address 3845 S RED EAGLE TERRACE

City-State-Zip: HOMOSASSA FL 34448

Title TREASURER, DIRECTOR

Name HAGSTROM, ROSE

Address 3877 S FLAMINGO TERRACE

City-State-Zip: HOMOSASSA FL 34448

Title DIRECTOR

Name KOSBAB, MAXINE

Address 6548 WEST PELICAN LANE

City-State-Zip: HOMOSASSA FL 34448

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LINDA GADKE**PRESIDENT/DIRECTOR**

03/11/2019

Electronic Signature of Signing Officer/Director Detail

Date